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Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)			
Case number (if known)	Chapter you are filing under:		
	Chapter 7		
	Chapter 11		
	Chapter 12		Check if this is
	Chapter 13		amended filing

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Ginger	
Write the name that is on	First name	First name
your government-issued picture identification (for	Middle name	Middle name
example, your driver's	Williams	
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last	First name	First name
8 years	Mi dello is osso	Middlesses
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX- 3127	
Security number or federal Individual	OR	OR
Taxpayer Identification number	9 xx - xx-	9 xx - xx-
(ITIN)		

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De	ebtor 1 Ginger First Name	Middle Name Last Name	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		791 Mackinaw Ave Number Street	Number Street
		Calumet City Illinois 60409 City State Zip Code	City State Zip Code
		Cook	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
_		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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De	ebtor 1 Ginger		Williams		Case number (if kno	own)	_
	First Name	Middle Name	Last Name				
Pa	rt 2: Tell the Court Abo	ut Your Bankruptcy (	Case				
7.	The chapter of the Bankruptcy Code you are choosing to file under		f description of each, see <i>Notic</i> 10)). Also, go to the top of pag			C. § 342(b) for Individuals Filing for opriate box.	
8.	How you will pay the fee	more details about cashier's check, or may pay with a creation of the cashier's check, or may pay with a creation of the cashier's check, or may pay with a creation of the cashier of the	It how you may pay. Typicall r money order. If your attornedit card or check with a prefee in installments. If you of Your Filing Fee in Installments of the be waived (You may renot required to, waive your fall in that applies to your fall remains the property of the pr	ly, if you ney is a print choose the contents (Contents are mily s	ou are paying the submitting your ed address. e this option, sig Official Form 103 this option only and may do so onlize and you are u	the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney on and attach the <i>Application for</i> BA).  If you are filing for Chapter 7. By law, ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)	a
9.	Have you filed for bankruptcy within the last 8 years?	Yes. District District District		When When When	MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY	Case number  Case number  Case number	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No.  Yes. Debtor District Debtor District		When	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known	_ _ _
11.	Do you rent your residence?	✓ No. Got				st You (Form 101A) and file it with	

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Williams Debtor 1 Ginger Case number (if known) Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? Ⅵ I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Ginger Williams Case number (if known)

#### First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Ginger First Name	Middle Noses	Williams Last Name	Case number (if ki	nown)
	Middle Name estions for Reportin			
16. What kind of debts do you have?	16a. Are your debt "incurred by a No. Go to Yes. Go to The your debt money for a bo No. Go to Yes. Go to Yes. Go to	es primarily consumer no individual primarily for line 16b.  To line 17.  To se primarily business of usiness or investment of line 16c.  To line 17.	or a personal, family, or hou lebts? <i>Business debts</i> are o	debts that you incurred to obtain the business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing ur expenses at No.			property is excluded and administrative cured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	□ 5	,000-5,000 6,001-10,000 0,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,0 \$100,001-\$500 \$500,001-\$1 m	000	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?		000	31,000,001-\$10 million 310,000,001-\$50 million 350,000,001-\$100 million 3100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below	11			and a trade or all a constants and
For you	correct. If I have chosen to f of title 11, United S under Chapter 7.	ile under Chapter 7, I a tates Code. I understar	m aware that I may proceed nd the relief available under	at the information provided is true and I, if eligible, under Chapter 7, 11,12, or 13 each chapter, and I choose to proceed e who is not an attorney to help me fill
	,		ad the notice required by 11	• , ,
	=	-		s Code, specified in this petition.
	connection with a b		sult in fines up to \$250,000	ing money or property by fraud in , or imprisonment for up to 20 years, or
	/s/ Ginger Willi	ams	×	
	Signature of Debt		Signature	of Debtor 2
	Executed on _	3/30/2018 MM / DD / YYYY	Execute	ed on

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Debtor 1 Ginger		Williams	Case number (if)	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 12,	or 13 of title 11, United	ave informed the debtor(s) about d States Code, and have explained the ilso certify that I have delivered to the
If you are not	debtor(s) the notice requ	uired by 11 U.S.C. § 3	42(b) and, in a case in v	which § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge afte	r an inquiry that the ir	nformation in the sched	ules filed with the petition is incorrect.
attorney, you do not	4.4			·
need to file this page.	/s/ Susan Eberhard	t	Date	3/30/2018
	Signature of Attorney	for Debtor	M	M / DD / YYYY
	Susan Eberhardt			
	Printed name			
	Semrad Law Firm			
	Firm name			
	11101 S. Western Av	enue		
	Street			
	Chicago		Illinois	60643
	City		State	Zip Code
	Contact phone	3124473701	Email address	seberhardt@semradlaw.com
			Illinois	
	Bar number		State	

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Ginger		Williams
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Sankruptcy Court for the:	Northern	District of Illinois
Case number (If known)			(State)

П	Check if this is an
_	amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	ФО ОО
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$4,575.00
1c. Copy line 63, Total of all property on Schedule A/B	\$4,575.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	<b>4.</b> 707.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$1,727.00
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$19,273.00
Your total liabilities	\$21,000.00
Part 3: Summarize Your Income and Expenses	
Part 3: Summarize Your Income and Expenses	
	\$2,114.82
. Schedule I: Your Income (Official Form 106I)	\$2,114.82

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Debt	tor 1 Ginger		Williams	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 4	4: Answer These Que	estions for Administrat	ive and Statistical Records		
6. <b>A</b> ı	re you filing for bankruptc	y under Chapters 7, 11, o	r 13?		
Г	No. You have nothing to	report on this part of the fo	rm. Check this box and submit this	s form to the court with your other s	chedules.
Ī.	Yes.				
7. <b>W</b>	— /hat kind of debt do you ha	ive?			
<u> </u>			mer debts are those incurred by an fill out lines 8-10 for statistical purp		
	Your debts are not print this form to the court with	-	ou have nothing to report on this pa	art of the form. Check this box and	submit
	From the Statement of You Form 122A-1 Line 11; OR, F		e: Copy your total current monthly orm 122C-1 Line 14.	income from Official	\$2,892.29
9.	Copy the following specia	ıl categories of claims fro	m Part 4, line 6 of Schedule E/F	:	
	From Part 4 on Schedule	E/F, copy the following:		Total claim	
	9a. Domestic support oblig	ations (Copy line 6a.)		\$0.00	<u>-</u>
	9b. Taxes and certain other	debts you owe the government	ment. (Copy line 6b.)	\$0.00	_
	9c. Claims for death or pers	sonal injury while you were i	ntoxicated. (Copy line 6c.)	\$0.00	<del>-</del>
	9d. Student loans. (Copy lin	ne 6f.)		\$0.00	<del>-</del>
	9e. Obligations arising out of priority claims. (Copy line 6		r divorce that you did not report as	\$0.00	-
	9f. Debts to pension or pro	fit-sharing plans, and other	similar debts. (Copy line 6h.)	\$0.00	-

\$0.00

9g. **Total.** Add lines 9a through 9f.

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Fill in this	informati	ion to identify your ca	ase:					
Debtor 1		nger			Williams			
Debtor 2	Fir	rst Name	Middle N	ame	Last Name			
(Spouse, if fi	ling) Fir	rst Name	Middle N	ame	Last Name			
United Sta	ates Bank	ruptcy Court for the:	Northern		District of Illinois			
Case num	nber				(State)			
Officia	al Forr	m 106A/B						Check if this is an amended filing
Sche	dule	A/B: Prope	rty					12/1
category v responsibl write your	where yo le for sup name ar	u think it fits best. E oplying correct inform nd case number (if k	se as complete ar mation. If more sp nown). Answer ev	nd acc pace is very qu	asset only once. If an asset fits in mo curate as possible. If two married pe s needed, attach a separate sheet to uestion. Other Real Estate You Own or	ople are this fo	e filing together, both a orm. On the top of any a	re equally
1. Do you			uitable interest i	n any	residence, building, land, or similar	propert	y?	
	No. Go t	ere is the property?						
1.1		ddress, if available, or o	other description		t is the property? Check all that apply. Single-family home Duplex or multi-unit building		the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property.
					Condominium or cooperative  Manufactured or mobile home		Current value of the entire property?	Current value of the portion you own?
	Number	Street State	Zip Code		and nvestment property Fimeshare Other		Describe the nature o interest (such as fee s the entireties, or a life	imple, tenancy by
				one.	has an interest in the property? Che Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only at least one of the debtors and another	ck	Check if this is co (see instructions)	mmunity property
					r information you wish to add about	this ite	m, such as local	
If you	own or h	ave more than one, lis	et hara:	prop	erty identification number:			
1.2		ddress, if available, or d			t is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home		the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own?
	Number	Street State	Zip Code		and nvestment property imeshare Other		Describe the nature of interest (such as fee sthe entireties, or a life	imple, tenancy by
			,	one.	has an interest in the property? Che Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another or information you wish to add about		(see instructions)	mmunity property

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	Ginger		Williams	Case number	(if known)	
	First Name	Middle Name	Last Name			
1.3 <u>Str</u>	eet address, if available, or oth		What is the property? Check all that a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	,	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
Nu Cit	mber Street y State	Zip Code	Land Investment property Timeshare Other		Describe the nature of interest (such as fee s the entireties, or a life	imple, tenancy by
		   	Who has an interest in the property?  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and and other information you wish to add a property identification number:	other	Check if this is co (see instructions)	mmunity property
	the dollar value of the por ave attached for Part 1. Wri	tion you own for	all of your entries from Part 1, inclu	ding any entries	for pages	
<b>Do you o</b> you own	that someone else drives. If yo ans, trucks, tractors, sport util o	equitable interes ou lease a vehicle,	t in any vehicles, whether they are a also report it on Schedule G: Executor	-	-	
. Ye	es es	,	5,6.00			
3.1	Make Model:	Mercedes- Benz C230	Who has an interest in the propone.  Debtor 1 only	erty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
<u> </u>	Make	Mercedes- Benz C230 1997 70000	Who has an interest in the propone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community	d another	the amount of any secu	ured claims on Schedule D:
3.1	Make Model: Year: Approximate mileage: Other information:	Mercedes- Benz C230 1997 70000	Who has an interest in the propone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and	d another property (see	the amount of any secu Creditors Who Have Cla Current value of the entire property? \$2600.00	ured claims on Schedule D: aims Secured by Property.  Current value of the portion you own?

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ebtor 1	Ginger		Williams	Case number	er (if known)	
	First Name	Middle Name	Last Name			
3.3	Make  Model:  Year:		Who has an interest in the one.	property? Check	the amount of any secu	claims or exemptions. Pu red claims on Schedule L nims Secured by Property.
	Approximate mileage:		Debtor 1 only		Orealions with thave one	ums becared by Property.
	Approximate mileage.		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 or	nly	entire property?	portion you own?
			At least one of the debtor	rs and another		
			Check if this is communications)	nity property (see		
3.4	Make		Who has an interest in the	property? Check		claims or exemptions. Pu
	Model: Year:		one.		•	red claims on <i>Schedule I</i> aims Secured by Property
	Approximate mileage:		Debtor 1 only		Creditors Who Have Claims Secured by Proper	
	, pp.oato mioago.		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 or	nly	entire property?	portion you own?
			At least one of the debtor	rs and another	<u> </u>	
			Check if this is communing instructions)	nity property (see		
4.1	Yes Make Model:		Who has an interest in the one.	property? Check		claims or exemptions. Princed claims on <i>Schedule</i>
	Year:		Debtor 1 only		•	nims Secured by Property
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 or	nly	entire property?	portion you own?
			At least one of the debtor	rs and another		
			Check if this is communinstructions)	nity property (see		
4.2	Make		Who has an interest in the	property? Check	Do not deduct secured	claims or exemptions. Po
	Model:		one.		-	red claims on Schedule
	Year:		Debtor 1 only		Creditors Who Have Cla	nims Secured by Property
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 or	nly	entire property?	portion you own?
			At least one of the debtor	rs and another		
			Check if this is communing instructions)	nity property (see		
5. Add	I the dollar value of the po	rtion vou own for all	of your entries from Part 2, i	including any entrie	es for pages	
			e			600.00

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Williams Debtor 1 Ginger Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Furniture \$300.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Television \$100.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Misc. Used Clothing \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Misc. Jewelry \$75.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1175.00 for Part 3. Write that number here ......

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Williams Debtor 1 Ginger Case number (if known) First Name Middle Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: First Merchant Bank \$800.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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Deb.	for 1 Ginger First Name	Middle Name	Williams Last Name	Case number (if known)	
20.	Government and corp	orate bonds and other negotials include personal checks, cashiers'	le and non-negotiable		
		ents are those you cannot transfer			
	No Yes. Give specific information about	Issuer name:			
	them				
21.	Retirement or pension Examples: Interests in II		, thrift savings accounts,	or other pension or profit-sharing plans	
	<b>✓</b> No				
	Yes. List each	Type of account:	Institution name:		
	account separately.	401(k) or similar plan:			
	. ,	Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		prepayments d deposits you have made so that with landlords, prepaid rent, public			
	Yes	Electric:			
	_	Gas:			
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			· -
		Telephone:			· -
		Water:			· -
		Rented furniture:			· -
		Other:			· -
23.	Annuities (A contract for	or a periodic payment of money to	you, either for life or for	a number of years)	
	<b>✓</b> No				
	Yes	Issuer name and description:			

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Debt		Middle	Williams	Case number (if known)	
24.			count in a qualified ABLE program,	or under a qualified state tuition program.	
		30(b)(1), 529A(b), and 529	(b)(1).		
	Yes	Institution name and descri	ption. Separately file the records of any	interests.11 U.S.C. § 521(c):	
	•				· -
25.	Trusts, equita exercisable fo	•	property (other than anything listed	in line 1), and rights or powers	
	<b>✓</b> No				1
	Yes. Descr	be			
26.	Patents, copy	rights, trademarks, trade	secrets, and other intellectual pro	perty	
	- N	net domain names, website	es, proceeds from royalties and licensing	ng agreements	
	✓ No  Yes. Descr	be			
27.		chises, and other general	I intangibles ses, cooperative association holdings,	liquor licenses, professional licenses	
	√ No				
	Yes. Descr	ibe			
N#					0
Mor	ney or propert	y owed to you?			Current value at the
		-			Current value of the portion you own?  Do not deduct secured claims or exemptions
	Tax refunds ow	ed to you			portion you own?
	Tax refunds ow			Federal	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ow  ✓ No  — Yes. Give so about	pecific information them, including whether		Federal:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ow  ✓ No  — Yes. Give si about you al	pecific information		State:	portion you own? Do not deduct secured claims or exemptions.  \$0.00
	Tax refunds ow  No Yes. Give sy about you al and the	pecific information them, including whether ready filed the returns te tax years	proved current child current mainta	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds ow  No Yes. Give sy about you al and the  Family support Examples: Past	pecific information them, including whether ready filed the returns te tax years	spousal support, child support, mainte	State:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds ow  No Yes. Give so about you al and th  Family support Examples: Past  No	pecific information them, including whether ready filed the returns te tax years	spousal support, child support, mainte	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds ow  No Yes. Give so about you al and th  Family support Examples: Past  No	pecific information them, including whether ready filed the returns te tax years	spousal support, child support, mainte	State:  Local: enance, divorce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds ow  No Yes. Give so about you al and th  Family support Examples: Past  No	pecific information them, including whether ready filed the returns te tax years	spousal support, child support, mainte	State:  Local: enance, divorce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00
28.	Tax refunds ow  No Yes. Give so about you al and th  Family support Examples: Past  No	pecific information them, including whether ready filed the returns te tax years	spousal support, child support, mainte	State:  Local: enance, divorce settlement, property settlement  Alimony:  Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  \$0.00 \$0.00
29.	Tax refunds ow  ✓ No  Yes. Give syabout you al and the support Examples: Past ✓ No  Yes. Give syabout you al and the support Examples: Past	pecific information them, including whether ready filed the returns te tax years  due or lump sum alimony, so pecific information	spousal support, child support, mainte	State:  Local:  enance, divorce settlement, property settlement  Alimony:  Maintenance:  Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  tt  \$0.00 \$0.00 \$0.00
29.	Tax refunds ow  No Yes. Give sy about you al and the samples: Past  No Yes. Give sy No Yes. Give sy Other amounts Examples: Unpa	pecific information them, including whether ready filed the returns le tax years  due or lump sum alimony, so pecific information		State: Local:  enance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  tt  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds ow  ✓ No  Yes. Give sy about you al and the second of the s	pecific information them, including whether ready filed the returns the tax years	ce payments, disability benefits, sick p	State: Local:  Penance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  tt  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds ow  ✓ No  Yes. Give sy about you al and the second of the s	pecific information them, including whether ready filed the returns the tax years	ce payments, disability benefits, sick p	State: Local:  Penance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  tt  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Ginger		Williams	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance   Examples: Health, disabil		alth savings account (HSA); credit, h	omeowner's, or renter's insurance	
	Yes. Name the insur of each policy and list		Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in propert If you are the beneficiary		someone who has died	v. or are currently entitled to receive	
	property because someo	•		,,	
	Ves. Describe				
33.			you have filed a lawsuit or made urance claims, or rights to sue	a demand for payment	
	No Yes. Describe				
34.	Other contingent and u	 unliquidated claims of	every nature, including countered	claims of the debtor and rights	
	✓ No Yes. Describe				
35.	Any financial assets yo	u did not already list			
	No Yes. Describe				
36.		•	n Part 4, including any entries fo		\$800.00
Part	_			nterest In. List any real estate in Part	1.
37.		y legal or equitable in	terest in any business-related pr		Current value of the
	No. Go to Part 6. Yes. Go to line 38.			<b>p</b> C	portion you own? Oo not deduct secured claims or exemptions
38.	Accounts receivable or	r commissions you alro	eady earned		
	No Yes. Describe				
39.	Office equipment, furni Examples: Business-relat		, modems, printers, copiers, fax ma	achines, rugs, telephones, desks, chairs, elect	ronic devices
	No Yes. Describe				

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Deb	tor 1 Ginger	Williams	Case number (if known)	
ı	First Name	Middle Name Last Name		
40.	Machinery, fixtures, ed	uipment, supplies you use in business, and tools of your trade	)	
	<b>✓</b> No			
	Yes. Describe			
41.	Inventory			
	<b>✓</b> No			
	Yes. Describe			
	-			
42.	Interests in partnershi	ps or joint ventures		
	✓ No			
		Name of entity:	% of ownership:	
	Yes. Give specific information about			
	them			
43. (	Customer lists. mailing	lists, or other compilations		
	—	,		
	No			
	Yes. Do your lists in	clude personally identifiable information (as defined in 11 U.S.C. §	101(41A))?	
	□ No			
	Yes. Descri	he		
	100. 2000	<b>5</b> 0		<del></del>
44.	Any business-related p	property you did not already list		
	<b>√</b> No			
	lacksquare			
	Yes. Give specific information			
	information	-		
		-		
				<u> </u>
				<del>-</del>
45. A	dd the dollar value of a	I of your entries from Part 5, including any entries for pages y	ou have attached	
		here		
_	Deceribe Any Fo	um and Commercial Fishing Deleted Dreserts Very O	num au Hava au Interest In	
Part	If you own or have an	rm- and Commercial Fishing-Related Property You O interest in farmland, list it in Part 1.	Wil or nave all interest in.	
46.	Do you own or have ar	y legal or equitable interest in any farm- or commercial fishin	ng-related property?	
		•		Current value of the
	No. Go to Part 7.			portion you own?
	Yes. Go to line 47.			Do not deduct secured claims
17	Form onimals		•	or exemptions
47.	Farm animals Examples: Livestock, po	ultry, farm-raised fish		
		· · · · · · · · · · · · · · · · · ·		
	No			
	Yes. Describe			

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Debt	tor 1	Ginger First Name		illiams st Name	Case number (if known)	
48.	Cro	ps-either growing o		SCIVALITE		
	V	No				
		Yes. Describe				
49.	Far	m and fishing equip	ment, implements, machinery, fixtures	s, and tools of trade		
	<b>✓</b>	No				
	Ш	Yes. Describe				
50	Eor	m and fishing suppl	ies, chemicals, and feed			
50.	гаг	No	ies, chemicais, and leed			
	M	Yes. Describe				
	_					
51.	Any	farm- and commer	cial fishing-related property you did n	ot already list		
	<b>✓</b>	No				
		Yes. Describe				
		L				
			of your entries from Part 6, including			
for Pa	art 6.	Write that number	here			
		Danasilaa All Dana		-+ : TI+ V Di-  N	A I de Alexan	
Part 53.			perty You Own or Have an Interest perty of any kind you did not already lis		LIST ADOVE	
			s, country club membership			
	⊻	No				
		Yes. Give specific information				
54. A	dd th	ne dollar value of all	l of your entries from Part 7. Write tha	t number here		.•
Part 8	8:	List the Totals of	Each Part of this Form			
55. <b>F</b>	Part	1: Total real estate	, line 2			
			_			
		2 total vehicles, line		\$2600.00		
		•	d household items, line 15	\$1175.00		
		l: Total financial as		\$800.00		
			elated property, line 45			
			ishing-related property, line 52			
			erty not listed, line 54			
o2. 1	otal	personal property.	Add lines 56 through 61	\$4575.00	Copy personal property total	+ \$4575.00
						\$4575.00
63. <b>T</b>	otal	of all property on S	chedule A/B. Add line 55 + line 62			Ψ+070.00

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Debtor 1	Ginger		Williams	Case number (if known)	
	First Name	Middle Name	Loot Nama		

#### Schedule A/B: Property. Additional page

Part 3: Describe Your Personal and Household Items						
Do you own or ha	ve any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.				
6.2. Household goo	ds and furnishings					
No						
Yes. Describe	Misc. Household Goods	\$150.00				
7.2. Electronics						
No						
Yes. Describe	Cell Phone	\$50.00				

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Fill in this infor	rmation to identify your c	ase:		
Debtor 1	Ginger		Williams	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				
(II KIIOWII)				Check if this is ar
Official	Form 106C			amended filing
Schedul	e C: The Prop	erty You Clair	n as Exempt	04/10
			and a sup filip or to mathew the athe one	 

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Part 1: Identify the Property You Claim as Exempt						
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.  ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)  For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption			
	Brief description:  Mercedes-Benz C230, 1997, 1997 Mercedes- Benz C230  Line from Schedule A/B:  03	\$2,600.00	\$2,400.00; \$200.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)			
	Brief description: Furniture Line from Schedule A/B: 06	\$300.00	\$0  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)			
3.	✓ No	ery 3 years after that for	375? cases filed on or after the date of adjustment.) within 1,215 days before you filed this case?				

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Brief description:  Misc. Used Clothing Line from Schedule A/B:  11  Brief description:  Misc. Jewelry Line from Schedule A/B:  12  Brief description:  Misc. Jewelry Line from Schedule A/B:  12  Brief description:  Television Line from Schedule A/B:  07  Brief description:  Cell Phone Line from Schedule A/B:  O7  Brief description:  Stockelle A/B:  O7  Brief description:  Cell Phone Line from Schedule A/B:  O7  Brief description:  Stockelle A	
description:  Misc. Used Clothing  Line from Schedule A/B: 11  Brief description:  Misc. Jewelry Line from Schedule A/B: 12  Brief description:  Television Line from Schedule A/B: 07  Brief description:  \$100.00  \$100% of fair market value, up to any applicable statutory limit  \$100.00  \$100% of fair market value, up to any applicable statutory limit  \$100.00  \$100% of fair market value, up to any applicable statutory limit  \$100% of fair market value, up to any applicable statutory limit  \$100% of fair market value, up to any applicable statutory limit  \$100% of fair market value, up to any applicable statutory limit  \$100% of fair market value, up to any applicable statutory limit  \$100% of fair market value, up to any applicable statutory limit  \$100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 11  Brief description: \$75.00	735 ILCS 5/12-1001(a)
Misc. Jewelry \$75.00   Line from Schedule A/B: 12   Brief description: \$100.00   Television \$100.00   Line from Schedule A/B: 07   Brief description: \$100.00   Cell Phone \$50.00   Line from Schedule A/B: 07   Brief description: \$50.00   Cell Phone \$100% of fair market value, up to any applicable statutory limit   Line from Schedule A/B: 07   Brief description: \$150.00   Misc. Household Goods \$150.00   Line from \$150.00   Misc. Household Goods 100% of fair market value, up to any applicable statutory limit	
Misc. Jewelry  Line from Schedule A/B: 12  Brief description: Television  Line from Schedule A/B: 07  Brief description: Cell Phone Line from Schedule A/B: 07  Brief description:  Statutory limit  \$100.00  \$100.00  \$100.00  \$100.00  \$100.00  \$100.00  \$100.00  \$100.00  \$100.00  \$100.00  \$2  \$300.00  \$300.00  \$300.00  \$300.00  \$400.00  \$500.00  \$500.00  \$500.00  \$500.00  \$100.00	735 ILCS 5/12-1001(b)
Line from  Schedule A/B: 12  Brief  description:  Television  Line from  Schedule A/B: 07  Brief  description:  Cell Phone  Line from  Schedule A/B: 07  Brief  description:  Statutory limit  100% of fair market value, up to any applicable statutory limit	
description:  Television  Line from Schedule A/B: 07  Brief description:  Cell Phone Line from Schedule A/B: 07  Brief description:  Misc. Household Goods Line from  \$100.00  \$100% of fair market value, up to any applicable statutory limit  \$50.00  100% of fair market value, up to any applicable statutory limit  \$150.00  100% of fair market value, up to any applicable statutory limit	
Television  Line from Schedule A/B: 07  Brief description: Cell Phone Line from Schedule A/B: 07  Line from Statutory limit  \$50.00  100% of fair market value, up to any applicable statutory limit  \$50.00  100% of fair market value, up to any applicable statutory limit  ### Statuto	735 ILCS 5/12-1001(b)
Brief description:  Cell Phone Line from Schedule A/B: 07  \$50.00  100% of fair market value, up to any applicable statutory limit  ### 150.00  100% of fair market value, up to any applicable statutory limit  ### 150.00  100% of fair market value, up to any applicable statutory limit	
description:  Cell Phone  Line from Schedule A/B:	
Cell Phone Line from Schedule A/B: 07  Brief description: Misc. Household Goods Line from  \$150.00  \$150.00  \$150.00  \$150.00  \$150.00  \$150.00  \$150.00  \$150.00  \$150.00  \$150.00  \$150.00  \$150.00  \$150.00	735 ILCS 5/12-1001(b)
Line from  Schedule A/B:07  Brief description:\$150.00  Misc. Household Goods  Line from	
description:  Misc. Household Goods  Line from  \$150.00  \$150.00  100% of fair market value, up to any applicable statutory limit	
Misc. Household Goods Line from  \$150.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Line from 100% of fair market value, up to any	
applicable statutory limit	
Brief	735 ILCS 5/12-1001(b)
description: \$800.00 \$800.00	
Checking account, First  Merchant Bank  — 3800.00  100% of fair market value, up to any	

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		DO	cument Page 23 01	09		
Fill in this info	rmation to identify your cas	se:				
Debtor 1	Ginger		Williams			
Dalata :: 0	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States I	Bankruptcy Court for the:	Northern	District of Illinois			
Case number			(State)			
, ,	Form 106D			J		Check if this is a mended filing
Schedu	ule D: Credito	ors Who Hav	ve Claims Secur	ed by Prop	ertv	12/1
more space is name and cas  1. Do any one No.	needed, copy the Additio e number (if known). creditors have claims se	ecured by your properly	e are filing together, both are equaler the entries, and attach it to a sty?  with your other schedules. You have	this form. On the top	of any additional pag	
Part 1: List	All Secured Claims					
2. List all separate	•	nan one creditor has a part	ured claim, list the creditor icular claim, list the other creditors order according to the creditor's	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 ACCEP Creditor's	TANCE NOW	Describe the property	that secures the claim:	\$1,727.00	\$300.00	\$1,427.00
5501 F  Number State Sta	leadquarters Dr	Contingent Unliquidated Disputed  Nature of lien. Check at a agreement your car loan) Statutory lien (such Judgment lien from Other (including a rie	made (such as mortgage or secured as tax lien, mechanic's lien) a lawsuit ght to offset)			
	ebt was <u>1/2018</u>	Last 4 digits of accou	nt number			

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$1,727.00

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E:II :	a thia inform	nation to identify your a	2021						
	1 this infor	nation to identify your c	ase:						
Deb	tor 1	Ginger		Williams					
		First Name	Middle Name	Last Name					
Deb	tor 2 use, if filing)	First Name a	Middle Nesses	Last Names					
(Spot	ise, ii iiiiig)	First Name	Middle Name	Last Name					
Unit	ed States Ba	ankruptcy Court for the:	Northern	District of Illinois					
Coo				(State)					
(If kno	e number own)	-							
Off	icial Fo	orm 106E/F				Г	Check	if this is an	amended filing
						_	_		
Sc	hedu	ıle E/F: Cre	ditors Who	<b>Have Uns</b>	ecured Claim	าร			12/15
Form claim the e know	106A/B) ans that are intries in the intries intries in the intries in the intries in the intries in the intries	nd on Sc <i>hedule G: Exe</i> listed in <i>Schedule D: C</i> ne boxes on the left. At	cutory Contracts and Unc Creditors Who Hold Claims	expired Leases (Offic s Secured by Propert	im. Also list executory conti ial Form 106G). Do not inclu y. If more space is needed, c he top of any additional pag	de any cr copy the F	reditors Part you	with partia need, fill it	Illy secured t out, number
1.		editors have priority un ão to Part 2.	secured claims against y	ou?					
2.	listed, iden As much a Continuation	tify what type of claim it s possible, list the claims on Page of Part 1. If mor	is. If a claim has both priori	ty and nonpriority amo ding to the creditor's n particular claim, list the		now both	priority a	nd nonprior	rity amounts.
						Tota clai		Priority amount	Nonpriority amount

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Williams Debtor 1 Ginger Case number (if known) First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **V** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** AMERICAN CREDIT ACCEPT 4.1 \$7,338.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 11/2016 961 E MAIN ST Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **SPARTANBURG** South Carolina 29302 Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify \_ 045 Automobile Is the claim subject to offset? No Yes ATT Mobility \$800.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5910 W. Plano Pkwy Ste 10 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Plano 75093 Texas City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only  $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Cell Phone Bill Is the claim subject to offset? No Yes **CAINE & WEINER** 4.3 \$330.00 Last 4 digits of account number 8005 Nonpriority Creditor's Name When was the debt incurred? 3/2013 21210 Erwin St Number Street As of the date you file, the claim is: Check all that apply. Contingent Woodland HIs California 91367 Unliquidated Zip Code City State Disputed Who incurred the debt? Check one. Debtor 1 only  $\overline{}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: **✓** No ENTERPRISE RENT A CAR: CREDIT GRANTOR CANNOT Other. Specify LOCATE CONSUMER

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Debtor 1 Ginger Williams Case number (if known) Last Name

Part 2	art 2: Your NONPRIORITY Unsecured Claims - Continuation Page							
	After listing any entries on this page, number them beginning with	th 4.5, followed by 4.6, and so forth.	Total claim					
4.4	City of Chicago - Dep't of Revenue	- Last 4 digits of account number	\$400.00					
	Nonpriority Creditor's Name PO Box 88292	When was the debt incurred?						
	Number Street	As of the date you file, the claim is: Check all that apply.						
	-	Contingent						
	Chicago Illinois 60608	Unliquidated						
	City State Zip Code	- Disputed						
	Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:						
	Debtor 1 only  Debtor 2 only	Student loans						
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or						
	At least one of the debtors and another	divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar						
	Check if this claim relates to a community debt	debts  Other Specify  Red Light Comera						
	Is the claim subject to offset?	Other. Specify Red Light Camera						
	<b>✓</b> No							
	Yes							
4.5	Comcast	- Last 4 digits of account number	\$1,200.00					
	Nonpriority Creditor's Name 11621 E. Marginal Way # 5	When was the debt incurred?						
	Number Street							
	Bankruptcy Dept	As of the date you file, the claim is: Check all that apply.  - Contingent						
		Unliquidated						
	Seattle Washington 98168	- 블						
	City State Zip Code Who incurred the debt? Check one.	Disputed						
	Debtor 1 only	Type of NONPRIORITY unsecured claim:						
	Debtor 2 only	Student loans						
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts						
	Check if this claim relates to a community debt	Other. Specify Cable Bill						
	Is the claim subject to offset?							
	<u>✓</u> No							
	Yes							
4.6	ComEd	- Last 4 digits of account number	\$1,000.00					
	Nonpriority Creditor's Name 3 Lincoln Center	When was the debt incurred?n/a						
	Number Street	As of the date you file, the claim is: Check all that apply.						
	Bankruptcy Section	Contingent						
	Oakhyaak Tawaaa Illinaia 60191	Unliquidated						
	Oakbrook Terrace Illinois 60181 City State Zip Code	Disputed						
	Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:						
	Debtor 2 only	Student loans						
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or						
	At least one of the debtors and another	divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar						
	블	debts						
	Check if this claim relates to a community debt	Other. Specify Electric Bill						
	Is the claim subject to offset?  No							
	Yes							

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Part 2	Your NONPRIORITY Unsecured Claims - Continuation	Page	
	After listing any entries on this page, number them beginning wit	h 4.5, followed by 4.6, and so forth.	Total claim
4.7	CONVERGENT OUTSOURCING	Last 4 digits of account number 0956	\$323.00
	Nonpriority Creditor's Name 10750 HAMMERLY BLVD #200	When was the debt incurred? 7/2014	
	Number Street		
		As of the date you file, the claim is: Check all that apply.  Contingent	
	Houston Texas 77043		
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans  Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		
	✓ No	ORIGINAL CREDITOR: Other. Specify COMCAST	
	Yes	<u> </u>	
4.8	Franciscan Health Hammond	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name 5454 Hohman Ave	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.  Contingent	
		<b>\\</b>	
	Hammond Indiana 46320	Unliquidated	
	City State Zip Code  Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts  Other. Specify Medical Bill	
	Is the claim subject to offset?		
	<b>✓</b> No		
	Yes		
4.9	HONOR FIN	Last 4 digits of account number 1501	\$4,682.00
	Nonpriority Creditor's Name 1731 Central	When was the debt incurred? 9/2014	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	-	Contingent	
	Evanston Illinois 60201	Unliquidated	
	City State Zip Code  Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify 39 Automobile	
	No		
	Yes		

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Debtor 1 Ginger Williams Case number (if known) Middle Name Last Name First Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim KEYNOTE CONS** 4.10 \$0.00 3221 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1/2014 1501 West Dundee Number Street As of the date you file, the claim is: Check all that apply. Contingent 60089 Buffalo Grove Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? **V ORIGINAL CREDITOR: 01 ✓** No Other. Specify PULLIAM MICHAEL AS AGENT Yes 4.11 PEOPLES ENGY \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 200 EAST RANDOLPH When was the debt incurred? 11/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent CHICAGO Illinois 60601 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_ Is the claim subject to offset? InstallmentLoan **✓** No Yes 4.12 Peoples Gas \$1,500.00 Last 4 digits of account number Nonpriority Creditor's Name 200 E. Randolph When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims

**✓** No Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

debts

Other. Specify

Debts to pension or profit-sharing plans, and other similar

Gas Bill

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Debtor 1 Ginger Williams Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 VERIZON \$1,200.00 - Last 4 digits of account number Nonpriority Creditor's Name NATIONAL RECOVERY P.O. BOX 26055 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated MINNEAPOLIS 55426 Minnesota City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Cell Phone Bill Other. Specify \_\_\_ Is the claim subject to offset? **✓** No Yes

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Debtor	1 Ginger First Name		Middle Name	Williams Last Name	Case number (if known)				
Part 3:	List Others to	Be Notified A	bout a Debt Tha	at You Already Liste	d				
co cr	ollection agency i ollection agency l editors here. If yo	is trying to colled here. Similarly, if ou do not have a	t from you for a d you have more th	lebt you owe to someor nan one creditor for any	for a debt that you already listed in Parts 1 or 2. For example, if a ne else, list the original creditor in Parts 1 or 2, then list the y of the debts that you listed in Parts 1 or 2, list the additional ebts in Parts 1 or 2, do not fill out or submit this page.				
	ARRIS & HARRIS I	LTD		On which entry	On which entry in Part 1 or Part 2 did you list the original creditor?				
_	111 W JACKSON BLVD S-400 Number Street		Line 4.4	of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims					
_	HICAGO ity	Illinois State	60604 Zip Code	Last 4 digits of	account number				

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Debtor 1 Ginger Williams Case number (if known)
First Name Middle Name Last Name

111001140	ind initial traine			
Part 4: Add th	ne Amounts for Each Type of Unsecured Claim			
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	for s	tatistical reporting purposes	s only
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00	
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00	
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00	
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$0.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$19,273.00	
	6j. Total. Add lines 6f through 6i.	6j.	\$19,273.00	

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			· ·		
Fill in this infor	rmation to identify your ca	ase:			
Debtor 1	Ginger		Williams		
	First Name	Middle Name	Last Name		
Debtor 2	<del></del>				
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	Northern	District of Illinois		
Case number			(State)		
(If known)				<del></del>	
Official	Form 106G				Check if this is an amended filing
Official	1 01111 1000				
Schedu	le G: Execut	ory Contract	s and Unexpi	red Leases	12/15
more space is	-			are equally responsible for supplyich it to this page. On the top of any	_
1. Do you ha	ave any executory co	ntracts or unexpired	eases?		
No. Ch	neck this box and file this fo	orm with the court with yo	ur other schedules. You hav	e nothing else to report on this form.	
Yes. Fi	ll in all of the information b	elow even if the contracts	or leases are listed on Scheo	dule A/B: Property (Official Form 106A)	/B).
				Then state what each contract or lemore examples of executory contracts	
Person o	or company with whom	you have the contract	or lease	State what the contract or	lease is for
2.1 Acorn Pr	operty Management			Residential Lease,	

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			Do	cument	Page 33 o	of 69
Fill in	this infor	mation to identify your c	ase:			
Debto	or 1	Ginger		Williams		
		First Name	Middle Name	Last Nar	ne	
Debto (Spous	or 2 e, if filing)	First Name	Middle Name	Last Nar	me	
Unito	d States B	Sankruptcy Court for the:		District of Illin		
Office	u States D	canking they count for the.	Northem	Sta		
Case (If know	number vn)					
<u> </u>						Check if this is a
<b>~</b> (()						amended filing
Off	ıcıal	Form 106H				
Sch	edul	e H: Your Cod	lebtors			12/1
				ots you may hay	e. Be as comple	ete and accurate as possible. If two married people are
filing t	ogether,	both are equally respon	nsible for supplying corre	ct information.	If more space is	needed, copy the Additional Page, fill it out, and number
		ne boxes on the left. At r every question.	tach the Additional Page	to this page. O	n the top of any	Additional Pages, write your name and case number (if
1.	Do you l	have any codebtors? (If	you are filing a joint case, o	to not list oithor	enouse as a codo	htor)
١.	□ No	•	you are ming a joint case, t	JO HOL IISL EILHELS	spouse as a code	bioi.)
	₩ Ye					
2.	Within t	he last 8 years, have yo	ou lived in a community p	roperty state or	r territory? (Com	nmunity property states and territories include Arizona,
			da, New Mexico, Puerto Rid	co, Texas, Washi	ngton, and Wisco	onsin.)
		o. Go to line 3.	mor engues, or local ocui	valant liva with v	ou at the time?	
		s. Dia your spouse, iori No	ner spouse, or legal equi	valent live with y	ou at the time?	
	뇓		nitv state or territorv did v	ou live?	Fi'	Il in the name and current address of that person.
			, , ,			·
		Name of your spouse, f	ormer spouse, or legal equ	ivalent		
		Number Street				
		Hambor Groot				
		City	State		Zip Code	
3.	In Colum	nn 1, list all of your cod	ebtors. Do not include yo	our spouse as a	codebtor if your	spouse is filing with you. List the person shown in line 2
						listed the creditor on Schedule D (Official Form 106D), D, Schedule E/F, or Schedule G to fill out Column 2.
	ochedal	e L/1 (Omciai i omi io	objet, or otherwise a (one	ciai i ciiii 1000	j. Ose ochedale	b, schedule L/1, or schedule a to iii out soldiiii 2.
	Column	1: Your codebtor				Column 2: The creditor to whom you owe the debt
						Check all schedules that apply:
3.1	Williams,	, Sonya				Schedule D, line
	Name				<del></del> _	
		791 Mackinaw Ave				✓ Schedule E/F, line 4.1

60409

Zip Code

Schedule G, line \_

Number

City

Calumet City

Street

Illinois

State

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Fill in this inforn	nation to identify	your case:				
	nger		William		_	
	st Name	Middle Name	Last N	ame	Che	ck if this is:
Debtor 2 (Spouse, if filing) Fir	ret Namo	Middle Name	Last N	ama	- I n	An amended filing
						A supplement showing post-petition chapter 1
United States Bar the:	nkruptcy Court for	Northern	District of Illi	nois tate)		expenses as of the following date:
Case number			(0	iai <del>e</del> )		
(If known)					i	MM / DD / YYYY
Official Fo	orm 106l					
Schedule	I: Your In	come				12/1
information about spouse. If more s number (if know	ut your spouse. I	f you are separated and I, attach a separate she y question.	d your spous	e is not filing	with you, do	r spouse is living with you, include not include information about your onal pages, write your name and case
1. Fill in your en	nployment		Debtor 1			Debtor 2
information.		Employment status				
•	ore than one job,	Employment status	Emplo	=		Employed
attach a separa information ab			Not Employed			Not Employed
employers.		Occupation				
Include part tin	ne, seasonal, or	Employer's name	New Star I	nc.		
self-employed	work.	Employer's address	1005 W. End Ave			
Occupation maker	ay include student r, if it applies.		Number Str			Number Street
			Chicago Heights	Illinois	60411	City State Zip Code
			City	State	Zip Code	_ Oity State Zip Odde
			City	State	Zip Oode	
		How long employed	City	State	Zip Oode	
Part 2: Give I	)etails About M	How long employed there?	——————————————————————————————————————	State	Zip Gode	
Estimate month spouse unless you	nly income as of to	flonthly Income	<b>1.</b> If you have	nothing to repo	ort for any line, v	vrite \$0 in the space. Include your non-filing
Estimate month spouse unless you If you or your no	nly income as of to	Monthly Income the date you file this form e more than one employer,	<b>1.</b> If you have	nothing to repo	ort for any line, v all employers fo	r that person on the lines below. If you need
Estimate month spouse unless you fi you or your nor more space, atta	nly income as of to ou are separated. n-filing spouse have ach a separate shee y gross wages, sala	Monthly Income the date you file this form e more than one employer,	n. If you have combine the	nothing to repo	ort for any line, v	r that person on the lines below. If you need
Estimate month spouse unless you fi you or your not more space, attained.  2. List monthly deductions.) be.	nly income as of to ou are separated. n-filing spouse have ach a separate shee y gross wages, sala	there?  Monthly Income  the date you file this form e more than one employer, et to this form.  ary, and commissions (befor	n. If you have combine the	nothing to repo information for For I	ort for any line, v all employers fo Debtor 1	r that person on the lines below. If you need

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Debtor 1Ginger First Name Middle	Name Last Nam	۵	Case number	(if	
i iist ivaille iviidale	name Last Nam		known) For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→	4.	\$2,940.51		
5. List all payroll deductions:					
5a. Tax, Medicare, and Social Security ded	uctions	5a.	\$558.37		
5b. Mandatory contributions for retirement	t plans	5b.	\$0.00		
5c. Voluntary contributions for retirement	plans	5c.	\$0.00		
5d. Required repayments of retirement fun	•	5d.	\$0.00		
5e. <b>Insurance</b>		5e.	\$203.62		
5f. Domestic support obligations		5f.	\$0.00		
5g. Union dues		5g.	\$39.61		
5h. Other deductions. Specify: Accident Insi	urance	5h. +	\$24.09 +		
6. Add the payroll deductions. Add lines 5a + 5 +5h.	<u></u>	6.	\$825.70		
7. Calculate total monthly take-home pay. Su	btract line 6 from line 4.	7.	\$2,114.82		
8. List all other income regularly received:					
8a. Net income from rental property and from business, profession, or farm					
Attach a statement for each property and be gross receipts, ordinary and necessary bus the total monthly net income.		8a.	\$0.00		
8b. Interest and dividends		8b.	\$0.00		
8c. Family support payments that you, a no dependent regularly receive	on-filing spouse, or a				
Include alimony, spousal support, child su divorce settlement, and property settlemen		8c.	\$0.00		
8d. Unemployment compensation		8d.	\$0.00		
8e. Social Security		8e.	\$0.00		
8f. Other government assistance that you a Include cash assistance and the value (if known cash assistance that you receive, such as funder the Supplemental Nutrition Assistance housing subsidies Specify:	nown) of any non- ood stamps (benefits	8f.	\$0.00		
8g. Pension or retirement income		8g.	\$0.00		
8h. Other monthly income. Specify:		8h. +	\$0.00 +		
9. Add all other income Add lines 8a + 8b + 8c		9.	\$0.00		]
10. Calculate monthly income. Add line 7 + line Add the entries in line 10 for Debtor 1 and Deb		10.	\$2,114.82 +		= \$2,114.82
<ol> <li>State all other regular contributions to the Include contributions from an unmarried partn friends or relatives.</li> <li>Do not include any amounts already included</li> </ol>	e expenses that you list in er, members of your househo	old, your	dependents, your roomm		
Specify:					11. + \$0.00
12. Add the amount in the last column of line Write that amount on the Summary of Schedu					12. \$2,114.82  Combined monthly income
13. Do you expect an increase or decrease wi	thin the year after you file	this forn	1?		,
Yes. Explain:					

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		Doct	illelli Page 30 01 09			
Fill in this infor	mation to identify your c	ase:				
Debtor 1	Ginger		Williams			
Dalatan	First Name	Middle Name	Last Name	Check if this is:		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended filing	9	
United States E	Bankruptcy Court for the:	Northern	District of Illinois			etition chapter 13
Case number			(State)	expenses as of the	ie ioliowing a	ate.
(If known)			-	MM / DD / YYYY	<del></del>	
Official	Form 106J					
	e J: Your Exp	ancac				12/15
Scriedui	e o. Tour Exp	<u> </u>				12/13
(if known). Ans	wer every question.		s form. On the top of any additiona	I pages, write your na	me and case	number
1. Is this a joi	cribe Your Househol	<u>u</u>				
	o to line 2					
Yes. D	oes Debtor 2 live in a se 	parate nousenoid?				
]	No					
[			nses for Separate Household of Debte	or 2.		
-	re dependents?					
Do not list I Debtor 2.		es. Fill out this information for ach dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does deper with you?	ndent live
	penses include If people other	כ				
than yourself an		es				
dependent	-					
Part 2: Esti	mate Your Ongoing I	Monthly Expenses				
	of a date after the bankı		you are using this form as a supple oplemental Schedule J, check the			
	-	ash government assistance t on Schedule I: Your Income	-		,	Your expenses
	I or home ownership exporthe ground or lot. 4.	penses for your residence. In	nclude first mortgage payments and		4.	\$1,025.00
If not inc	luded in line 4:					
	state taxes				4a	\$0.00
4b. Prope	rty, homeowner's, or rente	er's insurance			4b.	\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

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 Debtor 1 First Name
 Ginger
 Williams
 Case number (if known)

 Last Name
 Last Name

5. Additional mortgage payments for your residence, such as home equity loans         5.         \$0.00           5. Utilities:         6a. Electricity, heat, natural gas         6a.         \$180.00           6b. Waller, sewer, gurbage collection         6b.         \$0.00           6c. Telaphone, coil phone, Internat, satellite, and cable services         6c.         \$55.00           6d. Other, Spoodly:         6d         \$0.00           7. Food and housekeeping supplies         7.         \$300.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, Laundry, and dry cleaning         9.         \$55.00           10. Personal care products and services         11.         \$0.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation, include gas, maintananes, bus or train fare.         12.         \$270.00           Do not include car payments         14.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Life insurance.         15a         \$0.00           15. Life insurance.         15a         \$0.00           15. Charitable insurance deducted from your pay or included in lines 4 or 20.         \$0.00           15. Chesit insurance.	First Name	Middle Name Last Name		
Secues   S				Your expenses
6a. Electricity, heat, natural gas         6a.         \$180.00           6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, internet, stallillie, and cable services         6c.         \$65.00           6d. Other. Specify:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$300.00           8. Childcare and children's education costs         8.         \$0.00           9. Citothing, laundry, and dry cleaning         9.         \$50.00           10. Personal care products and services         11.         \$0.00           11. Medical and dental expenses         11.         \$0.00           11. Medical and dental expenses         11.         \$0.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation, include gas, maintenance, bus or train fare.         12.         \$270.00           Do not include acry payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Instratinement, clubs, recreation, newspapers, magazines, and books         15.         \$0.00           15. Life insurance         15.         \$0.00           15. Health insurance         15.         \$0.00 <t< td=""><td>5. Additional mortgage paym</td><td>ents for your residence, such as home equity loans</td><td>5.</td><td>\$0.00</td></t<>	5. Additional mortgage paym	ents for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$55.00           6d. Other, Specity:         7.         \$300.00           7. Food and housekceping supplies         7.         \$300.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$55.00           10. Personal care products and services         11.         \$0.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$270.00           10. Do not include ace payements         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15.         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15a.         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Vehicle insurance         15b         \$0.00           15c. Vehicle insurance         \$0.00         \$0.00           15c. Taxes Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00	6. Utilities:			
6c. Telephone, cell phone, Intermet, satellite, and cable services         6c.         \$55.00           6d. Other, Specify:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$300.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$55.00           10. Personal care products and services         10.         \$35.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation. Include gas, maintenance, bus or Irain fare.         12.         \$270.00           Do not include care payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15.         \$0.00           15. Lette insurance         156         \$0.00           15b. Leath insurance         156         \$0.00           15c. Vehicle insurance         156         \$0.00           15c. Vehicle insurance. Specify:         150	6a. Electricity, heat, natural g	gas	6a.	\$180.00
6d. Other. Specify:         6d         \$0.00           7. Food and housekeeping supplies         7.         \$300.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$550.00           10. Personal care products and services         10.         \$33.50           11. Medical and dental expenses         11.         \$0.00           12. Transportation, include gas, maintenance, bus or train fare.         12.         \$270.00           Do not include car payments         13.         \$0.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15.         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15c         \$56.00           15b. Health insurance         15c         \$56.00           15c. Vehicle insurance.         15c         \$56.00           15d. Other insurance. Specify:         16         \$0.00           17. Installment or lease payments:         17e         \$0.00           17b. Car payments for Vehicle 2         17e         \$0.00	6b. Water, sewer, garbage of	ollection	6b.	\$0.00
7. Food and housekeeping supplies         7.         \$300.00           8. Childran's and childran's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$50.00           10. Personal care products and services         10.         \$35.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$270.00           Do not include car payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         158         \$0.00           Do not include insurance ededucted from your pay or included in lines 4 or 20.         156.         \$0.00           15b. Health insurance         156         \$0.00           15c. Vehicle insurance         156         \$0.00           15c. Vehicle insurance. Specify:         150         \$0.00           15c. Vehicle insura	6c. Telephone, cell phone, I	nternet, satellite, and cable services	6c.	\$55.00
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9. Clothing, laundry, and dry cleaning       9. \$50.00         10. Personal care products and services       10. \$35.00         11. Medical and dental expenses       11. \$0.00         12. Transportation, Include gas, maintenance, bus or train fare.       12. \$270.00         Do not include car payments       13. \$0.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13. \$0.00         14. Charitable contributions and religious donations       15. neurance.         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15b. \$0.00         15b. Health insurance       15b. \$0.00       15c. Vehicle insurance       15c. \$56.00         15c. Vehicle insurance. Specify	7. Food and housekeeping su	pplies	7.	\$300.00
10. Personal care products and services       10.       \$33.00         11. Medical and dental expenses       11.       \$0.00         12. Transportation. Include gas, maintenance, bus or train fare.       12.       \$270.00         Do not include car payments       13.       \$0.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance.       15a. Life insurance deducted from your pay or included in lines 4 or 20.       15b. Insurance       15b.       \$0.00         15b. Health insurance       15b.       \$0.00<	8. Childcare and children's e	ducation costs	8.	\$0.00
11. Medical and dental expenses       11.       \$0.00         12. Transportation. Include gas, maintenance, bus or train fare.       12.       \$270.00         Do not include car payments.       13.       \$0.00         13. Entertalisment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance.       15a. Life insurance deducted from your pay or included in lines 4 or 20.       15b. Life insurance       15a.       \$0.00         15b. Health insurance.       15c. Section of 15c. Vehicle insurance       15c.       \$56.00         15c. Vehicle insurance.       15c.       \$56.00         15c. Vehicle insurance.       15c.       \$56.00         15c. Vehicle insurance.       15c.       \$56.00         15d. Other insurance. Specify:       15d.       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         \$pecify:       15c.       \$56.00         15d. Other insurance.       15c.       \$0.00         17b. Car payments for Vehicle 1       17a.       \$0.00         17c. Car payments for Vehicle 2       17b.       \$0.00         17c. Other. Specify:       Morthyliter Payment       17c.	9. Clothing, laundry, and dry	cleaning	9.	\$50.00
12.   Transportation. Include gas, maintenance, bus or train fare. Do not include car payments   12.   \$270.00     13.   Entertainment, clubs, recreation, newspapers, magazines, and books   13.   \$0.00     14.   Charitable contributions and religious donations   14.   \$0.00     15.   Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.     15a.   Life insurance   15a   \$0.00     15b.   Health insurance   15b   \$0.00     15c.   Vehicle insurance   15c   \$56.00     15c.   Vehicle insurance   15c   \$56.00     15c.   Vehicle insurance   15c   \$56.00     15d.   Other insurance. Specify:   15d   \$0.00     15d.   Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.     Specify:   15c   \$0.00     17.   Installment or lease payments:   17a.   Car payments for Vehicle 1   17a   \$0.00     17b.   Car payments for Vehicle 2   17b   \$0.00     17c.   Other.   Specify:   Monthly Fumiture Payment   17c   \$134.00     17c.   Other.   Specify:   17d   \$0.00     18.   Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i).   18.     19.   Other payments you make to support others who do not live with you.   Specify:   19.   \$0.00     20.   Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   20a   \$0.00     20b.   Real estate taxes.   20b   \$0.00     20b.   Real estate taxes.   20b   \$0.00     20d.   Maintenance, repair, and upkeep expenses.   20d   \$0.00     20d.   Maintenance, repair, and upkeep expenses.   20d   \$0.00     20d.   Maintenance, repair, and upkeep expenses.   20d   \$0.00     20d.   20d.   Maintenance, repair, and upkeep expenses.   20d   \$0.00     20d.   20d.	10. Personal care products a	nd services	10.	\$35.00
Do not include car payments   13.	11. Medical and dental exper	nses	11.	\$0.00
14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       0 not include insurance deducted from your pay or included in lines 4 or 20.         15a. Life insurance       15a \$0.00         15b. Health insurance       15b \$0.00         15c. Vehicle insurance       15c \$56.00         15d. Other insurance. Specify:       15d \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       5pecify:         Specify:       16         17. Installment or lease payments:       17a \$0.00         17b. Car payments for Vehicle 1       17a \$0.00         17c. Other. Specify:       17c \$134.00         17c. Other. Specify:       17d \$0.00         18. Your payments of a limony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       5pecify:       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a \$0.00         20b. Real estate taxes.       20b \$0.00         20c. Property, homeowner's, or renter's insurance       20c \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d \$0.00			12.	\$270.00
15. Insurance.	13. Entertainment, clubs, rec	reation, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.	14. Charitable contributions	and religious donations	14.	\$0.00
15b. Health insurance		ducted from your pay or included in lines 4 or 20.		
15c. Vehicle insurance	15a. Life insurance		<b>1</b> 5a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
Specify:	15c. Vehicle insurance		15c	\$56.00
Specify:	15d. Other insurance. Speci	fy:	15d	\$0.00
17. Installment or lease payments:  17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: Monthly Furniture Payment 17c. S134.00 17d. Other. Specify: Monthly Furniture Payment 17d. S0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 20d. Maintenance, repair, and upkeep expenses.	16. Taxes. Do not include taxes	s deducted from your pay or included in lines 4 or 20.		
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify: Monthly Furniture Payment  17c. \$134.00  17d. Other. Specify: Monthly Furniture Payment  17d. Other. Specify: 17d. \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. 19. Other payments you make to support others who do not live with you.  Specify: 19. \$0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2 17c. Other. Specify: Monthly Furniture Payment 17c. Other. Specify: Monthly Furniture Payment 17d. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	17. Installment or lease paym	nents:	10	
17c. Other. Specify: Monthly Furniture Payment  17d. \$134.00 17d. Other. Specify: 17d \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18.  19. Other payments you make to support others who do not live with you.  Specify: 19. \$0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	17a. Car payments for Vehic	cle 1	17a	\$0.00
17d. Other. Specify: 17d \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18.  19. Other payments you make to support others who do not live with you.  Specify: 19. \$0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20a \$0.00  20b. Real estate taxes. 20b \$0.00  20c. Property, homeowner's, or renter's insurance 20c \$0.00  20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	17b. Car payments for Vehic	cle 2	17b	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	17c. Other. Specify: Month	nly Furniture Payment	17c	\$134.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20c. \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.	17d. Other. Specify:		17d	\$0.00
19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20c \$0.00  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00				\$0.00
Specify:			18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20b. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00		e to support others who do not live with you.	40	<b>#0.00</b>
20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		sees not included in lines 4 or 5 of this form or on Schedule I. Your Income	19.	\$0.00
20b. Real estate taxes.  20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00			20a	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00				
20d. Maintenance, repair, and upkeep expenses.  20d \$0.00		s, or renter's insurance		
			20e	\$0.00

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Debtor 1				Williams	Case number (if known)		
	First Na	ame	Middle Name	Last Name			
21. <b>Othe</b>	r. Spec	ify:				21	\$0.00
00.0.1							
	-	our monthly expens	ses.				\$2,105.00
		es 4 through 21.					\$0.00
		` .	,. ,.	from Official Form 106J-2			\$2,105.00
22c. /	Add line	e 22a and 22b. The re	esult is your monthly exp	enses.		22.	
23.Calcu	ılate y	our monthly net inc	ome.				
23a. (	Copy lir	ne 12 (your combined	d monthly income) from	Schedule I.		23a	\$2,114.82
23b.	Сору у	our monthly expense	s from line 22 above.			23b	\$2,105.00
23c. S	Subtrac	t your monthly exper	nses from your monthly in	ncome.			\$9.82
	The res	sult is your monthly n	et income.			23c	
24 Do v	ou exp	ect an increase or o	decrease in your expen	ses within the year after y	ou file this form?		
-							
				oan within the year or do yon nodification to the terms of			
111011	.gage p	ayment to increase o	i decrease because of a r	irodineation to the terms of	your mongage:		
<b>✓</b> 1	No						
	es/es						
		Explain here:					
		Ехріані пете.					

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Ginger		Williams	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Sankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				

### Official Form 106Dec

### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Pa	t 1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to I	nelp you fill out bankruptcy forms?
	<b>☑</b> No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and
	that they are true and correct.	
X	/s/ Ginger Williams	<b>x</b>
	Signature of Debtor 1	Signature of Debtor 2
	Date 3/30/2018	Date
	MM/DD/YYYY	MM/DD/YYYY

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Fill in	n this infor	mation to identify your c	ase:					
Deb	tor 1	Ginger		Williams				
Dobi	tor O	First Name	Middle Na	ame Last Nam	ie			
Debi (Spot	use, if filing)	First Name	Middle Na	ame Last Nam	16			
Unit	ed States E	Bankruptcy Court for the:	Northern	District of Illino				
	e number			(Stat	te)			
(If kno	own)							Check if this is a
Of	ficial	Form 107						amended filing
Sta	ateme	nt of Financia	l Affairs fo	r Individuals	Filing for	r Bankru	iptcy	04/1
Be a	s comple	ete and accurate as po if more space is neede own). Answer every q	ssible. If two ma ed, attach a sepa	rried people are filing	together, both	are equally	responsible for s	
Pari	Give	Details About Your	Marital Status a	nd Where You Lived	Before			
1.	What is	your current marital sta	atus?					
	Ма	rried						
	✓ Not	t married						
2.	During t	the last 3 years, have yo	ou lived anywhere	other than where you li	ve now?			
	✓ No Yes	s. List all of the places yo	ou lived in the last 3	3 years. Do not include	where you live r	now.		
	Del	btor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
					Same as	Debtor 1		Same as Debtor 1
	Nui	mber Street		From	Number Stre	et	_	From
	_			То				То
	City	y State	Zip Code		City	State	Zip Code	
		Julio	p			Debtor 1	p	Same as Debtor 1
								_
	Nui	mber Street		From	Number Stre	et		From
				То	-			То
	City	y State	Zip Code		City	State	Zip Code	
3.	and territo No	e last 8 years, did you e vries include Arizona, Califo Make sure you fill out So	omia, Idaho, Louisia	ana, Nevada, New Mexico	, Puerto Rico, Te		- '	ommunity property states )

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Williams Debtor 1 Ginger Case number (if known) First Name Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions and Check all that apply. exclusions) exclusions) Wages,  $\overline{\mathbf{A}}$ Wages, \$9856.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$44716.00 For last calendar year: commissions, commissions, (January 1 to December 31, 2017 bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$23338.00 For the calendar year before that: commissions, commissions, (January 1 to December 31, 2016 ) bonuses, tips bonuses, tips YYYY Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2017 YYYY For the calendar year before that: (January 1 to December 31, 2016

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Debtor 1 Ginger Williams Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment Dates of payment Total amount paid Amount you still owe for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City Suppliers or State Zip Code vendors Other

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	Ginger		VVI	lliams	Case number	(if known)
	First Name	Middle Name	Las	st Name		
nsi or ge	iders include your relat porations of which you	are an officer, director business you operate	rs; relatives of any person in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? you are a general partner; g securities; and any managing odomestic support obligations,
<b>✓</b>	No					
	Yes. List all paymer	ts to an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name					
	Number Street					
	City Stat	e Zip Code	•			
	Insider's Name					
	Number Street					
	City Stat	a Zin Codo				
	City Stat	e Zip Code	=			
	der?					
<b>✓</b>	No	ts guaranteed or cosign	•	Total amount paid	Amount you still owe	Reason for this payment  Include creditor's name
<b>✓</b>	No		sider.  Dates of		-	
	No Yes. List all paymen		sider.  Dates of		-	
	No Yes. List all paymen Insider's Name Number Street	ts that benefited an in	sider.  Dates of		-	
	No Yes. List all paymen	ts that benefited an in	sider.  Dates of		-	
	No Yes. List all paymen Insider's Name Number Street	ts that benefited an in	sider.  Dates of		-	
	No Yes. List all payment  Insider's Name  Number Street  City State	ts that benefited an in	sider.  Dates of		-	
	No Yes. List all payment  Insider's Name  Number Street  City State  Insider's Name	ts that benefited an in	sider.  Dates of		-	

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Williams Debtor 1 Ginger Case number (if known) Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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First Name  Middle Name  Last Name  11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or f accounts or refuse to make a payment because you owed a debt?	Case number (if known)
accounts or refuse to make a payment because you owed a debt?	
<del></del>	inancial institution, set off any amounts from your
✓ No ☐ Yes. Fill in the details.	
Describe the action the creditor	or took Date action Amount was taken
Creditor's Name	
Number Street	
Last 4 digits of account number:	XXXX-
City State Zip Code	
12. Within 1 year before you filed for bankruptcy, was any of your property in the possessi appointed receiver, a custodian, or another official?	ion of an assignee for the benefit of creditors, a court-
<u>✓</u> No	
Yes Part 5: List Certain Gifts and Contributions	
Part 5: List Certain Gifts and Contributions	
13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value	ue of more than \$600 per person?
✓ No ✓ Yes. Fill in the details for each gift.	
Gifts with a total value of more than \$600 Describe the gifts per person	Dates you Value gave the gifts
Person to Whom You Gave the Gift	
Person to Whom You Gave the Gift  Number Street	
Number Street  City State Zip Code	
Number Street	
Number Street  City State Zip Code	
Number Street  City State Zip Code  Person's relationship to you	

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	Ginger		Williams	Case number (if kno	vn)	
	First Name	Middle Name	Last Name			
Wi	thin 2 years before you file	ed for bankruptcy, did	d you give any gifts or contrib	utions with a total value	of more than \$600	to any charity?
<b>V</b>	No					
Ě	ı   Yes. Fill in the details for	coach aift or contribut	ion			
		-	IOI I.			
	Gifts or contributions to		Describe what you cont	ributed	Date you	Value
	that total more than \$6	600			contributed	
	Charity's Name		-			
	,					
	Number Street		-			
	City State	Zip Code	_			
	•	•				
6:	List Certain Losses					
	No Yes. Fill in the details.  Describe the property y	ou lost and	Describe any insurance	coverage for the loss	Date of your	Value of property
	how the loss occurred		Include the amount that in pending insurance claims A/B: Property.		loss	lost
						-
7.						
Wit	out seeking bankruptcy o	d for bankruptcy, did r preparing a bankrup	you or anyone else acting on otcy petition? or credit counseling agencies for			anyone you consult
Wit	hin 1 year before you file out seeking bankruptcy o	d for bankruptcy, did r preparing a bankrup	otcy petition?			anyone you consult
Wit abo	hin 1 year before you file out seeking bankruptcy o lude any attorneys, bankrup No	d for bankruptcy, did r preparing a bankrup	otcy petition?	r services required in your b		Amount of payment
Wit abo	hin 1 year before you file out seeking bankruptcy or lude any attomeys, bankrup No Yes. Fill in the details.	d for bankruptcy, did r preparing a bankrup	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
Wit abo	hin 1 year before you file out seeking bankruptcy o lude any attorneys, bankrup No	d for bankruptcy, did r preparing a bankrup	or credit counseling agencies for credit counseling agencies for Description and value of	r services required in your b	Date payment or transfer	Amount of
Wit abo	hin 1 year before you file out seeking bankruptcy of lude any attorneys, bankrup No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid	d for bankruptcy, did r preparing a bankrup otcy petition preparers, o	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
Wit abo	hin 1 year before you file but seeking bankruptcy of lude any attorneys, bankrup No Yes. Fill in the details.	d for bankruptcy, did r preparing a bankrup otcy petition preparers, o	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
Wit abo	hin 1 year before you file out seeking bankruptcy of lude any attorneys, bankrup No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	d for bankruptcy, did r preparing a bankrup otcy petition preparers, o	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
Wit abo	hin 1 year before you file out seeking bankruptcy of lude any attorneys, bankrup No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street	d for bankruptcy, did r preparing a bankrup otcy petition preparers, o	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
Wit abo	hin 1 year before you file out seeking bankruptcy of lude any attorneys, bankrup No  Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois	d for bankruptcy, did r preparing a bankrup otcy petition preparers, of	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
Wit abo	hin 1 year before you file out seeking bankruptcy of lude any attorneys, bankrup No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street	d for bankruptcy, did r preparing a bankrup otcy petition preparers, o	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
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Wit abo	hin 1 year before you file out seeking bankruptcy of lude any attorneys, bankrup No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None	d for bankruptcy, did r preparing a bankrup otcy petition preparers, of e  6  60643  Zip Code	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
Wit abo	hin 1 year before you file out seeking bankruptcy of ude any attorneys, bankrup No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address	d for bankruptcy, did r preparing a bankrup otcy petition preparers, of e  6  60643  Zip Code	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
Wit abo	hin 1 year before you file out seeking bankruptcy of lude any attorneys, bankrup No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Pa	d for bankruptcy, did r preparing a bankrup otcy petition preparers, of e  6  60643  Zip Code	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
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Wit abo	hin 1 year before you file but seeking bankruptcy of bude any attorneys, bankrup No  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Pa	d for bankruptcy, did r preparing a bankrup otcy petition preparers, of e  6  60643  Zip Code	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
Wit abo	hin 1 year before you file but seeking bankruptcy of lude any attorneys, bankrupt No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Pate Person Who Was Paid  Number Street	d for bankruptcy, did r preparing a bankruptcy petition preparers, of the preparers of the	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
Wit abo	hin 1 year before you file but seeking bankruptcy of bude any attorneys, bankrup No  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Pa	d for bankruptcy, did r preparing a bankrup otcy petition preparers, of e  6  60643  Zip Code	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
Wit abo	hin 1 year before you file but seeking bankruptcy of lude any attorneys, bankrupt No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Path Person Who Was Paid  Number Street  City State  Chicago Illinois State  Chicago Illinois State  Email or website address None Person Who Made the Path Person Who Was Paid  Number Street	d for bankruptcy, did r preparing a bankruptcy petition preparers, of the preparers of the	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
Wit abo	hin 1 year before you file but seeking bankruptcy of lude any attorneys, bankrupt No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Pate Person Who Was Paid  Number Street	d for bankruptcy, did r preparing a bankruptcy petition preparers, of the preparers of the	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
Wit abo	hin 1 year before you file but seeking bankruptcy of lude any attorneys, bankrupt No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Path Person Who Was Paid  Number Street  City State  Chicago Illinois State  Chicago Illinois State  Email or website address None Person Who Made the Path Person Who Was Paid  Number Street	d for bankruptcy, did r preparing a bankruptcy petition preparers, of the second secon	or credit counseling agencies for credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment

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Debt		Ginger		Williams Cas	se number <i>(if known)</i>	· <u> </u>	
		First Name	Middle Name	Last Name		·	
17.	help	you deal with your cre	ed for bankruptcy, did yo editors or to make paymo or transfer that you listed o		lf pay or transfer	any property to a	inyone who promised to
		No Yes. Fill in the details.					
				Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment
		Person Who Was Paid					<u> </u>
		Number Street					
		City State	e Zip Code				
	Incl	ude both outright transfer	r business or financial af rs and transfers made as so Iready listed on this statem	ecurity (such as the granting of a security	interest or mortga	ige on your propert	y). Do not include gifts
				Description and value of property transferred		y property or ceived or debts p	Date transfer was made
		Person Who Received T	ransfer				
		Number Street					
		City State Person's relationship to	•				
		Person Who Received T	ransfer				
		Number Street					
		City State Person's relationship to					
19.	ben	hin 10 years before you eficiary? ese are often called asset- No Yes. Fill in the details.		you transfer any property to a self-se	ttled trust or sim	ilar device of whi	ch you are a
	Ш	100. I iii ii i die detalls.		Description and value of the prop	perty transferred		Date transfer was made
		Name of trust					

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Williams Debtor 1 Ginger Case number (if known) Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

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Debtor 1 Ginger Williams Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

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Deb	tor 1	Ginger			Williams		Case number	(if known)	
		First Name		Middle Name	Last Name	1			
26.	Hav	e you been a party	/ in any judici	al or administr	ative proceeding	under any en	vironmental law?	Include settlements and orde	ers.
		No Yes. Fill in the det	ails.						
					Court or agency		Natur	e of the case	Status of the case
		Case title			Court Name				Pending
		Case number			NumberStreet				On appeal
					City Sta	ate Zip	Code		Concluded
Part	t 11:	Give Details Ab	out Your B	usiness or Co	onnections to A	ny Business	3		
27.	Witl	nin 4 years before	you filed for b	ankruptcy, did	l you own a busine	ess or have a	ny of the following	connections to any business	s?
		A member of A partner in a An officer, di An owner of a	a limited liable a partnership rector, or mar at least 5% of bove applies	lity company (L naging executiv the voting or e	LC) or limited liab re of a corporation quity securities of	ility partnersh	1	r part-time	
	Н		,,,			e nature of th		Employer Identification r	
								include Social Security n	umber or ITIN.
		Business Name			_			EIN:	
		Number Street			Name of ac	countant or b	oookkeeper	Dates business existed	
		City	State	Zip Code				From To	
					Describe th	e nature of th	ne business	Employer Identification r include Social Security n	
		Business Name			_			EIN:	
		Number Street			Name of ac	countant or b	nookkeener	Dates business existed	
		City	State	Zip Code	_			From To	
					Describe th	e nature of th	ne business	Employer Identification r include Social Security n	
		Business Name			_			EIN:	
		Number Street			Name of ac	countant or b	oookkeeper	Dates business existed	
		City	State	Zip Code	_			From To	

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Deb	tor 1	Ginger			Williams	Case number (if known)
		First Name	Middle	e Name	Last Name	
28.		nin 2 years before yo ditors, or other parti No Yes. Fill in the detai	es.	ruptcy, did you g	ive a financial statement	to anyone about your business? Include all financial institutions,
					Date issued	
		Name			MM/DD/YYYY	
		Number Street				
		City	State	Zip Code		
Part	12:	Sign Below				
t	rue a	and correct. I unders kruptcy case can re	stand that maki	ng a false staten	nent, concealing property mprisonment for up to 20	nts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
			e of Debtor 1			Signature of Debtor 2
						Date
		Date 3/3	30/2018			Date
[	V Y	lo ′es			ancial Affairs for Individu ney to help you fill out ba	als Filing for Bankruptcy (Official Form 107)?
ſ	V N	lo				
ij	<b>=</b> Y	es. Name of person				Attach the Bankruptcy Petition Preparer's Notice,

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Ginger		Williams
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Sankruptcy Court for the:	Northern	District of Illinois
Case number (If known)			(State)

Check if this is an amended filing

#### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.				
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?		
	Creditor's name: ACCEPTANCE NOW  Description of property securing debt: Furniture	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. ✓ Yes.		
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.		
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.		
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and	No. Yes.		

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Debtor	Ginger		Williams	Case number (if	
1	First Name	Middle Name	Last Name	known)	_
Part 2:	List Your Unexpired I	Personal Property Leas	es		
For any informa	unexpired personal prop tion below. Do not list re	erty lease that you listed ir	Schedule G: Executor leases are leases that	ry Contracts and Unexpired Leases (Official Form 106G), fill in the t are still in effect; the lease period has not yet ended. You may 1 U.S.C. § 365(p)(2).	
Des	scribe your unexpired per	sonal property leases		Will the lease be assumed?	
Les	sor's name:			□ No □ Yes	
	cription of leased perty:				
Les	sor's name:			No Yes	
	scription of leased perty:			_	
Les	sor's name:			□ No □ Yes	
	cription of leased perty:			_	
Les	sor's name:			No Yes	
	scription of leased perty:				
Les	sor's name:			No Yes	
	scription of leased perty:				
Les	sor's name:			No Yes	
	scription of leased perty:				
Les	sor's name:			□ No □ Yes	
	cription of leased perty:				
Part_3:	Sign Below				
Unde			my intention about any	y property of my estate that secures a debt and any personal	
	-				
	/s/ Ginger Williams		<b>x</b> _		
Si	gnature of Debtor 1		Siç	ignature of Debtor 2	
Da	ate 3/30/2018		Da	ate	
	MM/DD/YYYY			MM/DD/YYYY	

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B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

		Northern Distric	ct of Illinois	
n re	Ginger Williams		Case No.	
_	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF	COMPENSATIO	N OF ATTORNEY F	OR DEBTOR
1	. Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf	year before the filing of the p	petition in bankruptcy, or agreed to	o be paid to me, for services
	For legal services, I have agreed to ac	cept		\$1,465.00
	Prior to the filing of this statement I I	nave received		\$0.00
	Balance Due			\$1,465.00
2	. The source of the compensation paid	d to me was:		
	<b>✓</b> Debtor	Other (specify)		
3	. The source of the compensation paid	d to me is:		
	<b>✓</b> Debtor	Other (specify)		
4	I have not agreed to share the abmembers and associates of my l	ove-disclosed compensation aw firm.	n with any other person unless the	ey are
		v firm. A copy of the agreeme	h a other person or persons who ent, together with a list of the nam	
5	. In return for the above-disclosed fee	, I have agreed to render legal	service for all aspects of the bank	kruptcy case, including:
	<ul> <li>a. Analysis of the debtor's finar bankruptcy;</li> </ul>	cial situation, and rendering	advice to the debtor in determinin	ng whether to file a petition in
	b. Preparation and filing of any	petition, schedules, statemen	nts of affairs and plan which may l	be required;
	c. Representation of the debtor	at the meeting of creditors ar	nd confirmation hearing, and any	adjourned hearings thereof;
6	. By agreement with the debtor(s), the	above-disclosed fee does no	t include the following services:	
		CERTIFICA	ATION	
	I certify that the foregoing is a complet tor(s) in this bankruptcy proceedings.	e statement of any agreemen	it or arrangement for payment to r	me for representation of the
	3/30/2018		/s/ Susan Eberhardt	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1.717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc">http://www.justice.gov/ust/eo/hapcpa/ccde/cc</a> approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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### UNITED STATES BANKRUPTCY COURT

**Northern District of Illinois** 

In re:	Williams, Ginger	Case No	Case No		
	Debtor(s)				
		Chapter.	Chapter7		
	VERIFICAT	ION OF CREDITOR MAT	RIX		
Tr knowledge	ue and correct to the best of their				
Date:	3/30/2018	/s/ Williams, Ging Williams, Ginger Signature of Deb			

AMERICAN CREDIT ACCEPT 961 E MAIN ST SPARTANBURG, SC, 29302

HONOR FIN 1731 Central Evanston, IL, 60201

ACCEPTANCE NOW 5501 Headquarters Dr ATTN: Acceptance Now Customer Service Plano, TX, 75024

CAINE & WEINER 21210 Erwin St Woodland Hls, CA, 91367

CONVERGENT OUTSOURCING 10750 HAMMERLY BLVD #200 Houston, TX, 77043

KEYNOTE CONS 1501 West Dundee Buffalo Grove, IL, 60089

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO, IL, 60601

Comcast p.o. box 196 Newark, NJ, 07101

VERIZON 455 Duke Drive Franklin, TN, 37067

ATT Mobility One AT&T Way Bedminster, NJ, 07921

Franciscan Health Hammond 5454 Hohman Ave Hammond, IN, 46320

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ComEd 1919 Swift Drive Oak Brook, IL, 60523

Peoples Gas PO BOX 2968 Milwaukee, WI, 53201

City of Chicago - Dep't of Revenue PO Box 88292 Chicago, IL, 60608

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1465.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.

Adding additional bills \$31.00
 Motion to Reopen and Avoid Lien \$1000.00
 Motion to Reopen \$350.00 + court costs

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 03/30/2018

20

Client \_

Attorney

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Debtor 1 Ginger First Name	Willia Middle Name Last	ams Case	number (if known)	
	estions for Reporting Purposes			
16. What kind of debts do you have?	16a. Are your debts primarily co "incurred by an individual pri  No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily bu money for a business or inve  No. Go to line 16c.  Yes. Go to line 17.  16c. State the type of debts you co	imarily for a personal, fan Isiness debts? Business Estment or through the op	nily, or household purpos debts are debts that you peration of the business	incurred to obtain or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<ul> <li>No. I am not filing under Chapter</li> <li>✓ Yes. I am filing under Chapter 7. expenses are paid that fund</li> <li>✓ No.</li> <li>☐ Yes.</li> </ul>	Do you estimate that after a		
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	50,0	01-50,000 01-100,000 e than 100,000
19. How much do you estimate your assets to be worth?		\$1,000,001-\$10 \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$	0 million	0,000,001-\$1 billion 000,000,001-\$10 billion ,000,000,001-\$50 billion e than \$50 billion
20. How much do you estimate your liabilities to be?		\$1,000,001-\$10 \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$6	0 million	0,000,001-\$1 billion 000,000,001-\$10 billion ,000,000,001-\$50 billion e than \$50 billion
Part 7: Sign Below	I have examined this notition, and	I dodaro undor popalty o	of parium that the informa	etion provided is true and
I have examined this petition, and I declare under penalty of perjury that the information provided is true correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,1 of title 11, United States Code. I understand the relief available under each chapter, and I choose to prounder Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help rout this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 ye both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.		nder Chapter 7, 11,12, or 13, and I choose to proceed an attorney to help me fill 2(b). fied in this petition. property by fraud in		
	Signature of Debtor 1		Signature of Debtor 2	
	Executed on 3/30/2018 MM / DD /	YYYY	Executed onM	// / DD / YYYY

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Fill in this infor	mation to identify your ca	ase:		74 3	
Debtor 1	Ginger		Williams		
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois (State)		
Case number			,		
(If known)	,	335			
Official Form 106Dec					
Declaration About an Individual Debtor's Schedules					

Check if this is an amended filing

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	1: Sign Below					
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?					
	<b>☑</b> No					
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).				
	Under penalty of perjury, I declare that I have read the summary	and schedules filed with this declaration and				
	that they are true and correct.		000000000000000000000000000000000000000			
×	/s/ Ginger Williams College Williams Signature of Debtor 1	Signature of Debtor 2				
	Date 3/30/2018 MM/DD/YYYY	Date				

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Debto	or 1 Ginger	Williams	Case number (if known)	
,	First Name Middle Name	Last Name		
	Within 2 years before you filed for bankruptcy, did you creditors, or other parties.  No Yes. Fill in the details below.	give a financial state	ment to anyone about your business? Include all financial institutions,	
		Date issued		
		Date Issued		
	Name	MM/DD/YYYY	_	
	N			
	Number Street			
	City State Zip Code			
Part	12: Sign Below			
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection will a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
x /s/ Ginger Williams Col NGU 1 Will x				
	Signature of Debtor 1		Signature of Debtor 2	
	Date 3/30/2018		Date	
D	Did you attach additional pages to Your Statement of F	inancial Affairs for Ind	lividuals Filing for Bankruptcy (Official Form 107)?	
Г	☑ No			
Ē	Yes			
D	Did you pay or agree to pay someone who is not an atto	orney to help you fill o	ut bankruptcy forms?	
I.	<b>√</b> No			
	Yes. Name of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	

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otor Ginger			Williams	Case number (if
Fir	rst Name	Middle Name	Last Name	known)
t 2: Lis	st Your Unexpired Pers	onal Property Lease	s	
ormation		tate leases. Unexpired	leases are leases that	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Describ	be your unexpired persona	I property leases		Will the lease be assumed?
Lessor's	s name:			☐ No ☐ Yes
Descript property	tion of leased y:			
Lessor's	s name:			☐ No ☐ Yes
Descript property	tion of leased y:			
Lessor's	s name:			☐ No ☐ Yes
Descript property	tion of leased y:			
Lessor's	s name:			□ No □ Yes
Descript	tion of leased y:			
Lessor's	s name:			☐ No ☐ Yes
Descript	tion of leased y:			
Lessor's	's name:			□ No □ Yes
Descript property	etion of leased y:			
Lessor's	's name:			□ No □ Yes
Descript property	etion of leased y:			_
3: Sig	gn Below			
Under pe			my intention about any	property of my estate that secures a debt and any personal
<b>X</b> /s/ 0		rgy Wil	k s	gnature of Debtor 2
	3/30/2018 MM/DD/YYYY	/		ate MM/DD/YYYY

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Williams, Ginger  Debtor(s)	Case No	Case No.				
		Chapter.	Chapter7				
	VERIFICAT	TION OF CREDITOR MATRIX	<b>K</b>				
T knowledg	The above named Debtors hereby verify thate.	at the attached list of creditors is true a	nd correct to the best of their				
Date:	3/30/2018	/s/ Williams, Ginger Williams, Ginger Signature of Debtor	Congred de:				

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Debtor 1	Ginger First Name	Middle Name	Williams Last Name		Case number (if known)			
	T ii st i vaine	WIGGIE Name	Last Name		Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
Do no under	the Social Security Act.	ou contend that the amount			\$0.00			
For yo	our spouse		\$0.00 \$0.00					
	on or retirement inco it under the Social Secu	me. Do not include any amo rity Act.	ount received that was	а	\$0.00			
amou paymo interna	nt. Do not include any ents received as a victin	rces not listed above. Spec benefits received under the S n of a war crime, a crime aga prism. If necessary, list other	Social Security Act or inst humanity, or	e				
T-4-1					+\$0.00		+	
Iotal	amounts from separate	pages, ir any.		Γ	1,40100		·	]=
each	5	ent monthly income. Add li	-		\$2,892.29	+	-	\$2,892.29
colu	imn. Then add the tota	l for Column A to the total fo	or Column B.	L				Total current
Part 2:	Determine Wheth	er the Means Test Appl	ies to You					monthly income
		onthly income for the year.						
12a. (	Copy your total current	monthly income from line 1	L		C	opy line	e 11 here →	\$2,892.29
		nber of months in a year).	•				401	X 12
120.	i ne result is your annu	al income for this part of the	Torm.				12b.	\$34,707.48
13 Calcu	ılate the median fami	ly income that applies to	you. Follow these step	os:				
Fill in	the state in which you	live.	Illinois					
Fill in	the number of people i	n your household.	1					
Fill in house		me for your state and size of	9 81 81 81 81 81 81 81 81				13	\$51,317.00
		edian income amounts, go o is list may also be available a			separate			
14. <b>How</b>	do the lines compare	?						
14a.	Line 12b is less that Go to Part 3.	an or equal to line 13. On the	e top of page 1, check	box 1, Ther	e is no presumptio	on of ab	ouse.	
14b.		nan line 13. On the top of pa Il out Form 122A-2.	age 1, check box 2, Th	he presumpt	ion of abuse is det	ermine	d by Form 122A-2.	
Part 3:	Sign Below							
By s	igning here, I declare u	nder penalty of perjury that t	he information on this	statement a	nd in any attachm	ents is t	true and correct.	
	/s/ Ginger Williams	Oingy We	lly	Signatu	re of Debtor 2			_
	Date 3/30/2018 MM/DD/YYYY	,			3/30/2018 MM/DD/YYYY			
		do NOT fill out or file Form 1 fill out Form 122A-2 and file						